

Get Movin'!

HEALTHYSD.GOV
Live Better. Grow Stronger.



125 Miles For Health Registration Form

Organization Name (as you would like it to be printed on the certificate):

Street Address:

City:

State:

Zip Code:

Email:

Phone:

Name of Individual Submitting Registration:

Describe how your organization implemented the 125 Miles For Health Challenge:

How many individuals participated in the challenge?

Describe any significant successes that have resulted from the challenge:

Submissions are due November 14, 2014. Please email completed form to DOH.info@state.sd.us

For best results, Adobe Reader or Acrobat are recommended when filling out and saving form data in this pdf.